



P.O. BOX 12068
CAPITOL BUILDING
AUSTIN, TEXAS 78711
512/463-0112
FAX: 512/463-0923

DISTRICT OFFICE
1235 S. MAIN STREET, SUITE 280
GRAPEVINE, TEXAS 76051
817/424-3446
FAX: 817/488-6648

E-MAIL: jane.nelson@senate.state.tx.us

The Senate of the State of Texas
Jane Nelson
Senate District 12

Committees:

FINANCE, CHAIR
TRANSITION LEGISLATIVE OVERSIGHT
COMMITTEE, CO-CHAIR
LEGISLATIVE AUDIT COMMITTEE
LEGISLATIVE BUDGET BOARD
STATE AFFAIRS
PARTNERSHIP ADVISORY COMMITTEE
JOINT COMMITTEE TO STUDY TRS
HEALTH BENEFIT PLANS

February 12, 2016

Executive Commissioner Chris Traylor
Health and Human Services Commission
4900 N. Lamar Blvd
Austin, Texas 78751

Dear Commissioner Traylor:

I am writing to request that the Texas Health and Human Services Commission review the Texas Policy Evaluation Project's new report on women's health.

While I appreciate efforts to shine light on policy challenges, it is important for that information to paint an accurate picture. This study samples a narrow population within the Texas Women's Health Program (TWHP) -- which represented only 33 percent of the overall number of women enrolled in our women's health programs in Fiscal Year (FY) 2014. This ignores hundreds of thousands of women being served through the Expanded Primary Health Care Program; the Family Planning Program; and the 628,000 women of child-bearing age receiving full Medicaid benefits, 75 percent of which received contraceptive services in FY 14. Women often rotate in and out of our state programs, so we must look across our *entire system* to determine whether we are truly meeting their needs. Just because a claim for service was not submitted to TWHP does not mean a woman went without that service.

The study also creates an impression that fewer Texas women are accessing long-acting reversible contraceptives (LARCs). That's simply not true. Across our state programs, there were more claims for LARCs in FY 2014 than there were in FY 2012 when Planned Parenthood was still a provider. Access to LARCs has been a major focus of our legislative efforts because they are effective for three, five or even 10 years.

As you conduct your review, please place a special focus on the suggested correlation with Medicaid births. My understanding is that births are up across the state, both in and out of the Medicaid population. This is also occurring nationally and tracks population trends in which birth

rates generally increase after a recession. However, if indeed the data supports this idea, we need to know that. On that point, I would ask that you be as candid as possible. We need an objective assessment of how our programs are working -- and how they are not working -- in order to address any deficiencies that may exist.

Specifically, I request:

- Your analysis on the study's methodology and findings;
- Data on contraception access in Texas Medicaid and the women's health programs that were ignored by this study, along with your assessment of overall trends in contraception access, including the forms cited in the study;
- Information on how factors outside of provider access may affect contraceptive use or the number of Medicaid births (for example, timing of LARC use, increased access to insurance, personal intent, etc.);
- A county-by-county breakdown of Medicaid births between 2011 and 2014 -- and your analysis as to whether any correlation exists between overall birth rates in counties where Planned Parenthood clinics closed; and
- An explanation as to how two Commission employees' names appeared as co-authors of this study, which was funded in part by the Susan T. Buffet Foundation -- a major supporter of Planned Parenthood.

This Legislature has provided record-level funding for women's health and the capacity to serve more women than ever before. We have grown our provider network and redesigned our programs to make it easier for women to navigate care. Critical evaluation is essential to good government, but women should not be misled into thinking the services they need are not available to them. Those services *are* readily available, and Texas women need to know that.

I look forward to working with you as we continue our efforts to improve Texas' women's health network.

Very truly yours,

A handwritten signature in black ink, appearing to read "Jane Nelson". The signature is fluid and cursive, with the first name "Jane" and last name "Nelson" clearly distinguishable.

Senator Jane Nelson

CC: Governor Greg Abbott
Lieutenant Governor Dan Patrick

Speaker of the House Joe Straus
House Appropriations Committee Chairman
John Otto